File with: lowa Ethics and Campaign Disclosure Board 510 E. 12<sup>th</sup>, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



## FOR INSTRUCTIONS, SEE BACK OF FORM DISCLOSURE SUMMARY PAGE

PM 1/7
LA ETHICS AND
CAMPAIGN DISCLOSURE BU

COMMITTEE NAME (Must be same as on Statement of Organ	ization)	7	2009 JAN 22 AM 10: 04
Aaron Heley Lehman	,	1 1	
IMPORTANT: Indicate by # type of committee you are reporting for: [7] (1) Statewide/Legislative/Judge Standing for Retention Candidate (2) (4) County Central Committee (5) County Candidate (6) City Candidate Subdivision Candidate (8) County PAC (9) City PAC (10) School Botton Local Ballot Issue	State PAC (3) State Party ate (7) School Board or Other Politica	(Re	DR-2 ev. 07/2007) DISCLOSURE REPORT  Office Use Only TMM. #
CANDIDATE COMMITTEES ONLY:		Loc	gged InS
Candidate Name	Political Party (if applicable)	1 )	anned
Aaron Heley Lehman		1 1	mputer
Office Sought School Board	District (if Senate or House)		dited
Late reports are subject to possible civil and criminal penalties. Purs		\(7) and 68A	A.401(3), the candidate, for a
	6.85-3224		
Com Vele Lelner	12110		1.19.09
SIGNATURE OF PERSON FILING REPORT	TELEPHONE		/ · / 9 · 09  DATE SIGNED
I AM FILING A 1/19/09	REPORT FOR (1) ELECTION	/(2)NON-F	LECTION YEAR.
(report date)	Indicate by		
CHECK IF AMENDMENT TO REPORT DATED	•		
LICHECK IF AMENDIMENT TO REPORT DATED			nittees, enter Date of Election
Check if this is final (termination) report and attach Notice of	Dissolution Form DR-3.	9/9/08	
(You must continue to file reports until a DR-3 is filed.)		which Electi Polk	ocal Committees, enter County in on is held
STATEMENT OF CASH ON HAND			
•			
CASH ON HAND at the beginning of the reporting period. (Total committee. This amount MUST be the same as the case of the last reporting period or must be zero if this is first	sh on hand at the end	\$	0.00
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Schedul	e A) (*also see in-kind below)	•••••	
Schedule F: Loans Received total (Attach Schedule F	)	•••••	
Schedule H: Total Sales of Campaign Property (Attac	h Schedule H)	•••••	
(Schedule H applies to Candidates' Comm	ittees Only)		
	SUB-TOTAL	\$	<del></del>
SUBTRACT TOTAL MONEY SPENT THIS PERIOD			
Schedule B: Expenditures total (Attach Schedule B) (*	*also see debts and loans below).		
Schedule F: Loan Repayments total (Attach Schedule	F)		
CASH ON HAND at the end of this reporting period (if final repo			0.00
**UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	
*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedu		•	200.00 1201.86
**OUTSTANDING LOANS (From Schedule F - Attach Schedule	•	•	
CONSULTANT BREAKDOWN (Schedule G Attached?)	. ,	······································	YES ✓ NO
CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attack	h Schedule H)	\$	
ALERE AL AMINI MONTH I MAN BILLI (1 IONI AMIGNOS II VIIGO	ii Gariedule I I)	Ψ	

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

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3			

SCHEDULE	
В	MONETARY
(Roy 07/03)	EXPENDITURE

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

CHECK THIS BOX IF AMENDING FORM

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEMIDE OR LEGISLATIVE CAMBIDATES, LIGHT THE CAMBIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE YOMA ETHICS & CAMPAIGN DISCLOSURE BOARD. COMMITTEE NAME (Must be same as on Statement of Organization)

Aaron Heley	Lehman			14 1 14
DATE EXPENDED (MAM/DD/YR)	CANDIDATE ID NUMBER (If approable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	FURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8-19-08	CKRKK	Polk County Election Office, 111 Court Avenue, Des Moines, IA 50319	List of voter	\$ 10.00
\$-25- <b>08</b>	CKSNA	Staples , 906 E. First Street, Ankony, IA: 50021	Mailing Labels for Postcards	37.99
8-27-08	CK# NA	Copy Shop 225 SE Oralabor Road, Ankeny, IA 50021	Postenrds	127.47
8-28-08	GK#NA	United States Post Office, Johnston, (A	Stamps for Postcards	270.00
9-2-08	ID# CK#6458	Copy Shop, 225 SE Oralabor Road, Ankeny, IA 50021	Campaign Signs	556,50
	(D#			
	CKS			
			SUB-TOTAL TOTAL (If last page of this schedule)	\$ 1001.96

HIS BOX APPLIES	O CANDIDATES'	COMMITTEES ONLY:

s of centern company property coating \$500 or more must also be inventoried on Schedule H. (Rafor to Schedule H Instructions.) upon to personalization providing consulting, advertising, fund-raising, polling, managing, organizing pervices must also be detail in Expanditures to personstantities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expanditure made by the person/oritity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowe Code (SA.402(3)(i)))

(for Schedule B)

COMMITTEE NAME (Must be same as on Statement of Organization)		SCHEDULE E (Rev. 06/97)	IN-KIND CONTRIBUTIONS
Aaron Heley Lehman			
	<del></del>		K THIS BOX IF
	Reset Form	AMEN	DING FORM

DATE RECEIVED	NAME AND ADDRESS	RELATIONSHIP TO CANDIDATE	DESCRIPTION OF IN KIND	ESTIMATED FAIR MARKET	√ IF FOR FUND-RAISER
(MM/DD/YR)	OF CONTRIBUTOR	* (if applicable)	CONTRIBUTION	VALUE	CONTRIBUTION
9/01/08	Citizens For Progress	none	signs	\$ 200.00	
SUB-TOTAL  TOTAL (if last  page of this  schedule)				\$ 200.00 \$ 200.00	
			· <del>-</del>	200.00	

\*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule E)